

UNITED STATES PATENT & TRADEMARK OFFICE
Washington, D.C. 20231

REQUEST FOR PATENT FEE REFUND				
1 Date of Request: _____		2 Serial/Patent # <u>10/521333</u>		
3 Please refund the following fee(s):		4 PAPER NUMBER	5 DATE FILED	6 AMOUNT
✓	Filing			\$ 100
	Amendment			\$
	Extension of Time			\$
	Notice of Appeal/Appeal			\$
	Petition			\$
	Issue			\$
	Cert of Correction/Terminal Disc.			\$
	Maintenance			\$
	Assignment			\$
	Other			\$
		7 TOTAL AMOUNT OF REFUND		\$ 100
10 REASON:		8 TO BE REFUNDED BY:		
		Treasury Check		
✓ Overpayment		✓ Credit Deposit A/C #:		
Duplicate Payment		<div style="border: 1px solid black; display: inline-block; padding: 2px;"> 9 1 8 -- 0 1 6 0 </div>		
No Fee Due (Explanation):				
11 REFUND REQUESTED BY:				
TYPED/PRINTED NAME: <u>John Anderson</u>		TITLE: <u>Paralegal Specialist</u>		
SIGNATURE: <u>John Anderson</u>		PHONE: <u>308-9140 ext 241</u>		
OFFICE: <u>PCT - DO/EO</u>				

THIS SPACE RESERVED FOR FINANCE USE ONLY:				
APPROVED: _____		DATE: _____		

Instructions for completion of this form appear on the back. After completion, attach white and yellow copies to the official file and mail or hand-carry to: